

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

CHERRYL AUGUSTE,

Plaintiff,

-against-

THE CITY OF NEW YORK, et al.,

Defendants.

25-CV-0410 (LTS)

ORDER DIRECTING SIGNATURE

LAURA TAYLOR SWAIN, Chief United States District Judge:

Plaintiff brings this action *pro se*. The *in forma pauperis* (“IFP”) application that Plaintiff submitted is unsigned. Rule 11(a) of the Federal Rules of Civil Procedure provides that “[e]very pleading, written motion, and other paper must be signed . . . by a party personally if the party is unrepresented.” Fed. R. Civ. P. 11(a); *see Becker v. Montgomery*, 532 U.S. 757, 764 (2001) (interpreting Rule 11(a) to require, “as it did in John Hancock’s day, a name handwritten (or a mark handplaced)”).

Plaintiff is directed to sign and submit the attached signature page of the IFP application within 30 days of the date of this order. No summons or answer shall issue at this time. If Plaintiff complies with this order, the case shall be processed in accordance with the procedures of the Clerk’s Office. If Plaintiff fails to comply with this order within the time allowed, the action will be dismissed without prejudice.

The Court certifies under 28 U.S.C. § 1915(a)(3) that any appeal from this order would not be taken in good faith, and therefore *in forma pauperis* status is denied for the purpose of an appeal. *Cf. Coppedge v. United States*, 369 U.S. 438, 444–45 (1962) (holding that appellant

demonstrates good faith when seeking review of a nonfrivolous issue).

SO ORDERED.

Dated: April 30, 2025  
New York, New York

/s/ Laura Taylor Swain

LAURA TAYLOR SWAIN  
Chief United States District Judge

- |   |   |  |
|---|---|--|
| (c) Pension, annuity, or life insurance payments  | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| (d) Disability or worker's compensation payments  | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| (e) Gifts or inheritances   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| (f) Any other public benefits (unemployment, social security, food stamps, veteran's, etc.) | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| (g) Any other sources   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

i received 789 in food stamps for my children

If you answered "No" to all of the questions above, explain how you are paying your expenses:

i am honestly struggling raising my kids right now i am only surviving because my mom helps me from time to time

4. How much money do you have in cash or in a checking, savings, or inmate account?  
right now i have less than \$1.00
5. Do you own any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value, including any item of value held in someone else's name? If so, describe the property and its approximate value:  
no
6. Do you have any housing, transportation, utilities, or loan payments, or other regular monthly expenses? If so, describe and provide the amount of the monthly expense:  
\$25 phone bill
7. List all people who are dependent on you for support, your relationship with each person, and how much you contribute to their support (only provide initials for minors under 18):  
davoriian auguste, son , i fully contribute  
kerome brown jr, son i fully contribute, Aiden auguste, son fully contribute
8. Do you have any debts or financial obligations not described above? If so, describe the amounts owed and to whom they are payable:  
no

*Declaration:* I declare under penalty of perjury that the above information is true. I understand that a false statement may result in a dismissal of my claims.

01/11/2025

Dated

auguste,cherryl

Signature

Name (Last, First, MI)

130 E 39th St apt 1603

Prison Identification # (if incarcerated)

new york

ny

10016

Address

6464840857

City

State

Zip Code

unbrokenfoundation.inc@gmail.com

Telephone Number

E-mail Address (if available)